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ABSTRACT

A Psychiatric Consultant's response to consultation in a school in racial transformation is described. Flexibility, awareness of the total field, and the need to have comprehensive sociocultural and political awareness are of key importance. After an assessment of the situation at this high school, the consultant began to ameliorate the processes of stereotyping and hostility by holding meetings with the administration, teachers, students, and parents, to assess their varying concerns, emotional reactions, and points of view. By the end of the first semester, the consultant had supplemented his role by participations in discussions on curriculum and teaching methods, student-faculty communication and decision making, and decision-sharing with the administration. He then sent a questionnaire out to teachers asking for their reactions to consultation. Several negative responses were noted. The second semester of consultation was spent working with administration and teachers involved in special projects. He also set up a one-day convocation to discuss problems of the school's population transition. In the third semester, the consultant will continue to provide assistance to the administration but will shift his focus to more long term consultative work in depth with selected groups of teachers. (KJ)

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THE ROLE OF A PSYCHIATRIC CONSULTANT TO A PUBLIC HIGH SCHOOL IN RACIAL TRANSITION-- CHALLENGE AND RESPONSE

By: Roman N. Anshin, M.D.*
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INTRODUCTION

In this paper the author intends to show how his role as a psychiatric consultant to a large urban high school varied according to the nexus of resistance to consultation on the school scene.[1] Berlin,[2-3] Caplan,[4] Millar,[5] and Rowitch, have previously reported in detail on the process of psychiatric consultation in school setting. All of these authors have focused on some of the more traditional problems of teacher resistance to accepting what psychiatric consultation can offer to them. What I particularly wish to report upon is the recognition and reaction by the consultant of two key dynamic resistances interpersonally in school consultation--those of teacher's political feelings, and those of their strong social attitudes and values.

Prior to beginning consultation in Woodside High School*** the consultant had experienced extensive experience in consul-

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**With much gratefulness for the advice and guidance given to me in this program by Dr. Jerome Rowitch, Senior Consulting psychiatrist for schools, Los Angeles County Dept. of Mental Health, and Dr. Saul Brown, Chief, Department of Child Psychiatry, Cedars-Sinai Medical Center, Los Angeles,

***Woodside is a ficticious name.

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tation with the staffs of a number of schools and agencies of different types, e.g. family service, crippled children, halfway houses.[6] The consultants' point of view in consultation was influenced by previous experience in family therapy, specifically by Saul Brown's concept of focusing upon intrapsychic and interpersonal resistence to change in a given field in family therapy.[7] Brown, a psychoanalyst, has been deeply influenced by Ericson, Sullivan and Lewin. He stresses attempting to understand the entire field in dealing with a problem in family therapy. Lindemann has commented on the importance of a psychiatrist understanding the changing needs of the community and being able to accept new roles for himself.[8] Borman,[9] Rafferty[10] and others have written about changes in the mental health professions in terms of "reforming" the profession by stressing flexibility, involvement and capacity to change goals and techniques.

THE FIRST SEMESTER OF CONSULTATION

The psychiatric consultant became interested in consulting at Woodside High School when he began hearing about the changing racial population of Woodside, from some of his adolescent patients. He was approached for a position as psychiatric consultant by the girl's vice principal with whom he had prior contact in a seminar that he had organized in the area of interdisciplinary role problems. The consultant, a child psychiatrist with a part time private practice, was brought to school weekly for a one and one half hour period under the auspices of a

consultation program sponsored by a Los Angeles County Department of Mental Health. Importantly, it should be stated that initially the consultant alone was involved in consultation without other personnel from Cedars-Sinai Department of Child Psychiatry, Los Angeles County Dept. of Mental Health or other agencies being involved in either consultation or in direct service roles.

Woodside was formerly an all white college-preparatory, upper middle class, largely Jewish high school. With the spread of black population from the inner city, geographically outward and socio-economically upward, middle class black families began moving into areas that were formerly predominantly Jewish. There were a number of parents in the Woodside school district who obtained transfers secondary to concerns about the deteriorating quality of education and school life at Woodside. In recent years, Woodside also had the presence of a fair number of Mexican-American and other Spanish speaking entrants because of its position as a school teaching English to foreign, non-English speaking youngsters. Thus, in December, 1968, when consultation began, Woodside's black population was about 18 per cent and the brown population, about 7 per cent. Besides some tension between black and white youngsters in the school, some beginning tension was occurring between black and brown groups, thus paralleling incidents that had occurred in less affluent sectors of Los Angeles.

During the first semester of weekly consultation, the consultant attempted to gain a total overview of the very complex

faculty, administration, pupil, and community field. He quickly realized the faculty feelings had been polarized into three groups: (1) a small number of "militant" conservatives who stereotyped and acted out, directly or indirectly, in the classroom against minority and socially rebellious or dissatisfied youngsters; (2) a larger group of vaguely uneasy "moderates" who were ambivalent, withdrawn, or attempting to follow a "reasonable" middle-of-the-road course; (3) varieties of "liberal" and "radical" teachers who, in varying degrees, identified with minority and socially alienated youngsters. This group of teachers ranged from those who were creative and open-minded to a small minority of others who purposely provoked antagonism in more conservative teachers and pathologically over-identified with youngsters, breaking teacher-student social boundaries to an extreme degree. Administration tried to be "reasonable" and enlightened, stressing communication and involvement with faculty, students, PTA, and a community advisory group.

The consultant held many different types of weekly consultation sessions. He started by beginning to ameliorate the processes of stereotyping and hostility developing in many teachers in relationship to the school's growing black population and more "militant" youngsters. Meetings were held with administrators, teachers, students, and parents to assess their varying concerns, emotional reactions, and points of view. There was a very active emphasis on openness and on decreasing distrust of the consultant. Consultation sessions were variously program-

oriented, case-oriented, and consultee-oriented. There were "rap" sessions with varying groups of teachers, parents and faculty, and several short "encounter" sessions with groups of faculty. Meetings were held with counsellors and with teachers involved with special projects such as a human relations program in the school-in-transition program. Particular stress was laid on the relieving of anxiety and hostility arising from misperceptions as to role encroachment and role diffusion as experienced by more conservative faculty; e.g. fantasies of more aggressive blacks and "hippie" Caucasian youngsters forcing teachers into a diminished or a demeaned status. The consultant frequently and openly demonstrated concern over bettering intrafaculty and faculty-administration relationships. Several family interviews with youngsters in the school were demonstrated focusing around issues of helping faculty to become more accepting of behavioural and verbal deviance. At the same time faculty was stimulated, in whatever way possible, to value expression, creativity, and pride in professional role.

At the end of the first semester of consultation, consultant felt exhilirated and overwhelmed by the task that he now saw more clearly before him. He had supplemented his traditional concept of mental health consultation to a high school by, for example, participating in and adding ideas to discussions around curriculum and teaching methods, student-faculty communication, and student-faculty decision-making and decision-sharing with administration, as well as the role of interested parents at

Woodside. He helped to set up socio-drama and panel discussions that were presented in faculty meetings focusing on the areas of teaching "problem" students and teacher self-assessment of attitudes toward students. He felt that he saw the administrative, faculty, student, and community blocks against positive forward movement, both secondary to personal (neurotic) bases in various individuals and on the grounds of various philosophic or political beliefs in different groups. He then decided to provide an open-ended questionnaire to teachers to assay their reactions to consultation. The vast number of responses were positive. However, two comments troubled him; (1) consultation was criticized as being too diffuse, working on too many different people, and not being involved in "depth" in any one group of teachers; (2) the consultant, because of his wish to improve communication and decrease intra-faculty antagonisms, was seen by several teachers as being allied with the administration and as "copping out and smoothing things over".

He then presented his consultation experience to an informal meeting of fellow-consultants involved with the Los Angeles County Department of Mental Health. He stressed some of his own conflicted feelings particularly recent feelings of helplessness and ambivalence. The administrative chief to the consultative program remarked that the consultant had attempted a unusual consultative program, unlike that of consultants in other schools. He noted the consultant had been attempting to do what "ten" consultants would try at one time! The consultant then realized that his consultation zeal was partially quite unrealistic in

nature, and indeed somewhat omnipotent as seen in perspective. He became more acutely aware of various teachers political differences and the feelings between union and non-union teachers, along with feelings between the union teachers and the administration. He saw how some of these differences were not easily or indeed even justly resolvable in terms of his efforts.*

SECOND SEMESTER OF CONSULTATION

After a four month break from consultation, the consultant's point of view shifted towards working with administration and teachers involved in special projects. He assisted in obtaining establishment of an open-ended therapeutic group for students on campus with personnel from one local clinic, along with the presence of a child psychiatrist from another center to work in terms of "sensitivity" and "awareness" with varying types of student groups. He helped to coordinate plans involving a "community house" program that had been set up during the summer by a group of energetic, dissatisfied teachers. This "community house' program involved "rap" sessions, interest groups, and other similar activities.**

*In the opinion of several "outside" and "inside" observers Woodside had an unusually polarized and divided faculty.

**This community house, in some ways similar to a "settlement house", provides an interesting example of the creative use of conflict resolution and sublimation. Teachers who were unhappy with the status quo mobilized their energies providing programs apparently of largely appealing to meddle-class clienated white youngsters; black and brown teenagers have not been much involved to this time, but hopefully will participate more in the future.

He helped to plan faculty programs to be put on by a black school-in-transition coordinator and suggested ideas for involving the use of black professionals to work directly in the school setting with black youngsters in groups. Most importantly, a dynamic, new principal arrived this second semester. This man was deeply disturbed both by faculty schisms and the racial strife in the school. The consultant helped to plan a one day "convocation" where the entire school population of 3,000 pupils and 130 teachers was broken up into small groups of 30 students and 15 teachers per group. Group leaders from many different community agencies cooperated in this effort. Material involving much feeling about racial fears, change of teacher status, concern over lowering of educational standards, and other relevant data emerged from the conference. Plans are in effect to use material from this meeting to assist in the planning of a more totally adequate school program in terms of meeting with current problems Woodside is undergoing. Some of the areas affected include curriculum change, establishment of more human relations classes, and more faculty-student participation in administrative decision-making. A parent "convocation" to be planned by parents is scheduled for early spring, 1970, with further school convocations considered possible. In the third semester of consultation the consultant will continue to provide assistance to administration as needed, and will shift his focus to more long term consultative work in depth with selected groups of teachers i.e. special education health counsellors. It is anticipated that more direct service will also be available at Woodside as a result of the convocation.

COMMENT

A psychiatric consultant's response to consultation in a school in racial transformation has been described. Flexibility, awareness of the total field, and the need to have comprehensive socio-cultural and political awareness are of key importance. Pumpian-Mindlin Has described creative and pathological aspects of omnipotence in adolescence in terms of youngsters' committment to scoial change and varieties of individual psychic disturbance. The solo consultant, unattached to a mental health center, as are many consultants both in city and rural areas, must be aware of how his own omnipotence is challenged and called forth in difficult consultation situations involving adolescents. The lure of youth, change, and individual striving for identity and meaning excites the consultant, but he must remain properly cognizant of his own limitations, both personally and professionally. It is only with this awareness that he can properly assist school staff, parents, and youngsters in the difficult task of coping with more adequately, their current challenges and problems. [12*, 13**]

*The response of a mental health center to a racial crisis in a high school urban setting have been described by Zegas et al.

**The report of the U.S. Commission on Civil Rights on Racial isolation in Public Schools is a valuable document detailing a broad view of this problem.

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